SUBMIT: COMPLETED APPLICATION, TAX Bayfield-County
lanning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138 APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN Date Stamp (Received) JUN 02 2014 Refund:

Date:

Permit #: Amount Paid: 6.9.1 からず

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INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

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☐ Non-Shoreland	XShoreland → Cr	Section 13	PCTE NE 1/4, NE 1/4	PROJECT LEE	Authorized Agent: (Person:	Contractor: SCON	Owner's Name:  Owner's Name:  Owner's Name:  Owner's Name:
	☐ Is Property/Land within 300 feet of River, Stream (incl. Internittent)  Creek or Landward side of Floodplain?  If yescontinue —  If yescontinue —  If yescontinue —  If yescontinue —  If yescontinue —	Section 13 , Township 46 N, Range 8	1/4 Gov't Lot Lot(s)	Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))	ontractor: S. LO	DUSE
	er, Stream (incl.Intermittent)  If yescontinue	W Town of:	CSM Vol & Page 7, 286	No つれーピーの10-40 0名	Agent Phone:	Contractor Phone: P	SANITARY D PRIVY D  Mailing Address:  1996 3178  City/State/Zip:
	Distance Structure is from Shoreline:	Delta	Lat(s) No. Block(s) No.	PIM: (23 digits) 04-016-7-46-08-13-101-000-8000の	Agent Mailing Address (include City/State/	I con River, WI 54847  Ontractor Phone: Plumber:	TARY PRIVY CONDITIONAL USE SPECIAL USE Mailing Address: 5486; 1996 217/8 St Rice Lake, W. City/State/Zip: 5486; W. City/State/Zip:
	7	io io			State/Zip):		ECIAL USE   B.O.A.
	Floodplain Zone?  Floodplain Zone?  Present?  Yes  No	୍ରା 🗸 🗸 🖁		Recorded Document: (i.e. Property Ownership) Volume 853 Page(s) 740	Written Authorization Attached □ Yes XNo	369-7870 Plumber Phone:	A. □ OTHER Telephone: 7/5 859-6(63 Cell Phone: 7/5

Proposed Construction:	Exicting Structur				-	000 00°	÷	material	Value at Time of Completion * include donated time &
uction:	Fxicting Structure: (if permit being applied for is relevant to it)	(**)	Property	🗆 Run a Business on	☐ <b>Relocate</b> (existing bldg)	☐ Conversion	☐ Addition/Alteration	New Construction	Project
	or is relevant to it)		□ Foundation	□ No Basement	□ Basement	□ 2-Story	☐ 1-Story + Loft	🗡 1-Story	# of Stories and/or basement
Length:	Length: 7						🔀 Year Round	□ Seasonal	Use
	O			X None		□ 3	□ 2	<b>1</b>	# of bedrooms
Width: Height:	Width: 50 Height: 24	□ None	Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)		(New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
	2H						- A Well	City	Water

Proposed Use	۲,	Proposed Structure	Dimensions
		Principal Structure (first structure on property)	×
		Residence (i.e. cabin, hunting shack, etc.)	×
		with Loft	×
Kesidential Use		with a Porch	×
		with (2 nd ) Porch	×
		with a Deck	×
		with (2 nd ) Deck	×
☐ Commercial Use		with Attached Garage	×
		Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	×
		Mobile Home (manufactured date)	×
		Addition/Alteration (specify)	×
☐ Municipal Use	X.	Accessory Building (specify) Dele blda	(50 × 70
		Accessory Building Addition/Alteration (specify)	×
The state of the s			
Rec'd for Issuande		Special Use: (explain)	×
		Conditional Use: (explain)	×
		Other: (explain)	×

Owner(s):  $\chi$  (If there are Mylfiple C am (are) responsible for the may be a result of Bayfie above described property Secretarial Staff
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
PARTIES and the application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) graph of the detail and accuracy of all information I (we) am (are) providing any that it will be relied upon by Bayfield County in the providing on this information I (we) am (are) providing in with this application. I (we) consent to county officials charged with administering county ordinances to have access to the ve described properly at any reasonable time for the purpose damspection.

Date 6-3-14 mers listed on the Deed All Owners must sign or letter(s) of auth are signing on behalf of the owner(s) a letter of authorization must accompany this application)  $0.80 \times 1031$  Chartely,  $1.00 \times 100$ drization must accompany this application)

Authorized Agent:

(If you

Address to send permit _

Po

Attach
Copy of Tax Statement V

If you recently purchased the property send your Recorded Deed

2664666

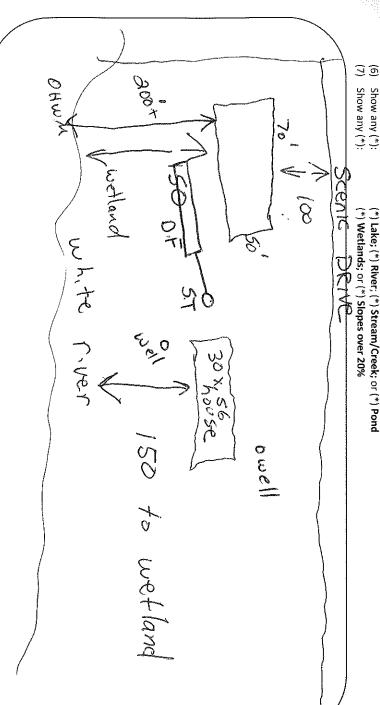
Show:

All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

8 Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

			Feet	AS	Setback to Privy (Portable, Composting)
			Feet	ō	Setback to <b>Drain Field</b>
Feet	tg.	Setback to Well	Feet	80	Setback to Septic Tank or Holding Tank
Feet	741/	Elevation of Floodplain	Feet	187	Setback from the East Lot Line
ΧNο	☐ Yes	20% Slope Area on property	Feet	<b>₹</b>	Setback from the West Lot Line (2) ver
Feet	1505	Setback from Wetland	Feet	λ, L	Setback from the South Lot Line
			Feet	<u>ح</u>	Setback from the North Lot Line Own KA
Feet	10/4	Setback from the Bank or Bluff			
Feet	100%	Setback from the River, Stream, Creek	Feet	B	Setback from the Established Right-of-Way
Feet	Z#	Setback from the Lake (ordinary high-water mark)	Feet	1005	Setback from the Centerline of Platted Road
ent	Measurement	Description	ent .	Measurement	Description

Prior to the placement or construction of a structure within ten (10) feet of the minimum req other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code To Enforce The Uniform Dwelling Code To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Construction Of New One & Two Family Dwelling Code The Code The Construction Of New One & Two Family Dwelling Code The Cod

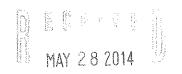
Issuance Information (County Use Only)	Sanitary Number: 404267	# of bedrooms: 2	Sanitary Date: 5-13-03	13-03
Permit Denied (Date):	Reason for Denial			
Permit#: 14:0104	Permit Date: 6-9-/4			
Is Parcel a Sub-Standard Lot Yes (Deed of Record) Is Parcel in Common Ownership Yes (Fused/Contiguous Lot(s)) Is Structure Non-Conforming Yes	bus Lot(s))  Sino  Mitigation Required Mitigation Attached	d □Yes XNo d □Yes XNo	Affidavit Required Affidavit Attached	∵Yes Mino ∵Yes Mino
Granted by Variance (B.O.A.)  Case #:	Previously Granted ⊡ Yes 【XNo	Previously Granted by Variance (B.O.A.) ☐ Yes XNo Case #:	*	
Was Parcel Legally Created X yes ☐ No Was Proposed Building Site Delineated X yes ☐ No	Were Property L	Were Property Lines Represented by Owner Was Property Surveyed	风Yes 风Yes	□ No
Inspection Record: West all setfacts	sattacks.		Zoning District ( $\mathcal{F}_{-}$ ) Lakes Classification ( $\mathcal{S}_{-}$	$(\mathcal{F}_{-}^{\prime})$
Date of Inspection: 6-5-14	Inspected by: M futfall		Date of Re-Inspection:	tion:
Condition(s): Town, Committee or Board Conditions Attached? I Yes I No - Uf No they need to be attached.)  Max mot be used for human habitation. No water under pressure in	hed? I Yes I No -(If No they need to be at Man Malatator . M	fached.) 5- Wates Unc	les presses	in m
structure.				
Signature of inspector: Michael dutal	utels		Date of Approval/	rely 4
Hold For Sanitary:  Hold For TBA:	Hold For Affidavit:	Hold For Fees:		



## APPLICATION FOR RECREATIONAL VEHICLE

Bayfield County Planning and Zoning Department P.O. Box 58 117 East Sixth Street Washburn, WI 54891 Phone – (715) 373-6138

Property Owner Colleen 1 Greg Elonen



Office Use:

Zoning District/Lakes Class R-1, 2

Application No. /4*0/09

Date 0-9-/4

Fee Paid 55/9-/4

Property Address 63960 Musky Lake Rd

INSTRUCTIONS: No permits will be issued until all fees are paid. A visited to be be be compared to the compare

Mailing Address 1513 N . 24st St	Fran River, WI St847
Superior W1 54880	Agent:Sel €
Telephone 715-394-9195	Written Authorization Attached: Yes() No (メ
<u>Accurate</u> Legal Description involved in this request:	
NW 1/4 of NE 1/4 of Section 4 Township 46	_N. Range 8 W. Town of Delfa
Gov't Lot Lot_2 Block Subdivision	V.7, P.9 CSM # 1074
Volume 917 Page 921 of Deeds Parcel I.D. #	7/1-07 20 07 000 1000
Additional Legal Description: and the NE 1/4 -	
Is your RV in a Shoreland Zone? Yes ¥ No ☐ If Yes, Di	stance from Shoreline: 75' or greater ( < 75' to 40' □ less than 40' □
RV: New A Replacement A You	ear: 2000 Vin #: 14 JB JO2 p94 1 C 80 171
Make of RV: Jours M	odel of RV: Eagle,
I FAILURE TO OBTAIN A PERMIT <u>or</u> PLACING RV ON PF	ROPERTY WITHOUT A PERMIT WILL RESULT IN PENALTIES
APPLICANT - PLEASE	COMPLETE REVERSE SIDE
For Off	ce Use Only Zoning District/Lakes Class: <u>R-1, 2</u>
	anitary Number <u>327497</u> Date <u>12-14-99</u>
Issuance Date <u>6-9-74</u> Permit Number <u>7</u>	4-0/09 Permit Denied (Date)
Reason for Denial:	
Inspection Record: Meets all set bades	
ву <u>М. Ғи</u> й	Total Date of Inspection 6-6-14
Variance (B.O.A.) #	
Condition: RV may be placed up to 4 months from iss	uance date. Must be removed by: 10-10-14
Rec'd for Issuance Signed Micha	el Furtile 6-9-14
JUN 09 2014 Insp	ector Date of Approval
Secretarial Staff	

and use frontage road as a guideline, and indicate North (N) on plot plan

show the RV (Recreation Vehicle) location

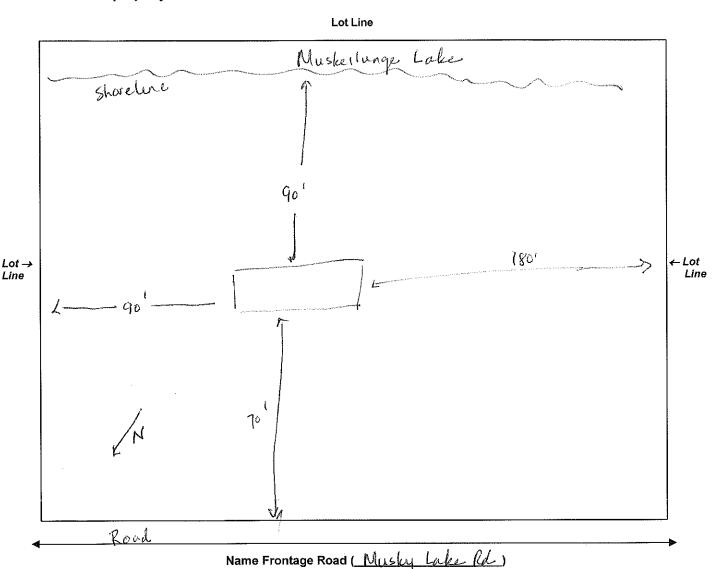
**IMPORTANT** Detailed Plot Plan is Neccessary

Show dimensions in feet on the following:

- a. RV from centerline of road(s).
- b. RV from right-of-way line

- d. RV from lake, river, stream or pond
- e. RV from Privy

c. RV from property lines



NOTICE: The local town, village, city, state or federal agencies may also require permits.

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent Collect	Crea Elonan	MEller	Date	5/27/14	
Address to send permit 1613 N. 2	Į.			( )	